

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: _____		2 Serial/Patent # <u>10/517579</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<div style="display: flex;"> <div style="width: 20px; text-align: center;">4</div> <div>Filing</div> </div>			
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Amendment</div> </div>			\$ <u>100</u>
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Extension of Time</div> </div>			\$
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Notice of Appeal/Appeal</div> </div>			\$
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Petition</div> </div>			\$
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Issue</div> </div>			\$
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Cert of Correction/Terminal Disc.</div> </div>			\$
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Maintenance</div> </div>			\$
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Assignment</div> </div>			\$
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Other</div> </div>			\$
		7 TOTAL AMOUNT OF REFUND	
		\$ <u>100</u>	
		8 TO BE REFUNDED BY:	
		<div style="display: flex;"> <div style="width: 20px; text-align: center;">X</div> <div>Treasury Check</div> </div>	
		Credit Deposit A/C #: <span style="border: 1px solid black; padding: 2px;">23--0650</span>	
10 REASON:			
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Overpayment</div> </div>			
<div style="display: flex;"> <div style="width: 20px;"></div> <div>Duplicate Payment</div> </div>			
<div style="display: flex;"> <div style="width: 20px;"></div> <div>No Fee Due (Explanation):</div> </div>			
REFUND COMPLETED PCT NATIONAL DIVISION			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>J.H.</u>		TITLE: <u>Pauline</u>	
SIGNATURE: <u>[Signature]</u>		PHONE: _____	
OFFICE: <u>PCT</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: _____		DATE: _____	

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

**Office of Finance  
Refund Branch  
Crystal Park One, Room 802B**